**BILL ANALYSIS**

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| Senate Research Center | C.S.H.B. 4298 |
| 86R34359 GCB-F | By: Murr (Zaffirini) |
|  | Health & Human Services |
|  | 5/19/2019 |
|  | Committee Report (Substituted) |

**AUTHOR'S / SPONSOR'S STATEMENT OF INTENT**

The current substance use facility licensure practices are overly restrictive, which creates significant challenges that limit providers' ability to meet the needs of Texans. H.B. 4298 seeks to reduce one of these barriers by better integrating behavioral health services while lowering costs and complexity. The current system requires each physical treatment facility location to have a separate operating license. This is unnecessarily time-consuming and expensive, and it is often not economically feasible to obtain a license in all counties, particularly in rural areas in which the population is not large enough to support an entire facility. As the system moves toward more integrated services to include treatment for mental illness and substance use disorders in the same settings, it is important to work towards eliminating as many barriers to care as possible.

H.B. 4298 would increase access to substance use services by allowing licensed outpatient treatment providers to operate secondary or satellite services in communities where it may not be economically feasible to open, maintain, and operate separately licensed facilities. Similar to home health services, they would operate under the auspices of a primary facility that complies with all facility licensure standards. The providers at each facility would be licensed substance abuse treatment professionals such as licensed chemical dependency counselors (LCDCs). The primary facility would maintain full responsibility and accountability for performance and services in satellite facilities. (Original Author's/Sponsor's Statement of Intent)

C.S.H.B. 4298 amends current law relating to the licensing of satellite offices of outpatient chemical dependency care facilities.

**RULEMAKING AUTHORITY**

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

**SECTION BY SECTION ANALYSIS**

SECTION 1. Amends Section 464.003, Health and Safety Code, as follows:

Sec. 464.003. EXEMPTIONS. Provides that this subchapter (Regulation of Chemical Dependency Treatment Facilities) does not apply to certain entities, including a satellite office or location in which the person providing services is operating under the supervision of a licensed outpatient care facility and the services delivered at the satellite site fall within the scope of the licensure of the outpatient care facility.

SECTION 2. Provides that the Department of State Health Services (DSHS) is required to implement a provision of this Act only if the legislature appropriates money specifically for that purpose. Authorizes, but does not require, DSHS, if the legislature does not appropriate money specifically for that purpose, to implement a provision of this Act using other appropriations available for that purpose.

SECTION 3. Effective date: September 1, 2019.